



Flathead County

Application to Serve on a Board or Committee

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| Applicant Name: | |
| Street Address: | |
| Mailing Address: | |
| Telephone: | |
| E-Mail: | |

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| Please specify the board/committee sought: | |
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|---|--|
| What is your interest and goal in serving on the board/committee: | |
|---|--|

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|---|--|
| Include experience relevant to the board or committee which you are applying: | |
|---|--|

This application is for consideration and does not necessarily mean you will be appointed to this board.

Applicant Signature

Date

Please return completed application to: **County Commissioners, 800 S Main, Room 302, Kalispell, MT 59901.**

If you have any questions, please call 406-758-5537. Thank you for your interest in serving our community!